PART B FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE, Commissioner for Patents, P.O. Box 1450,

Alexandria, Virginia 22313-1450 Or Fax (703) 746-4000

10/1	INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE further correspondence including the Patent, advance orders and notification of a directed otherwise in Block 1, by (a) specifying a new correspondence address; a Current correspondence address (Note: Legibly mark-up with any corrections Customer No. 26646 Kenyon & Kenyon ONE BROADWAY NEW YORK 10004 OCT 14 2005				will be mailed to the cur ing a separate "FEE ADD Note: A certifica Transmittal. Thi Each additional p certificate of mai I hereby certify the Postal Service withe Mail Stop ISS	N FEE (if required). Blocks 1 through 4 should be completed where appropriate. All be mailed to the current correspondence address as indicated unless corrected below or separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its on certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below. (Depositor's Name) (Signature)			
01 F	C:1501 _{APPLICA} 1400 DA FILING DATE			RST NAME	D INVENTOR	ATTORNEY DOC	KET NO.	CONFIRMATION NO.	
02 F(2:4504 300.00 DA 2:8001 10/666,23B0.00 DA	09/18/2003	Stuart Gifford			10554/3		8476	
	TITLE OF INVENTION: SHAPED-REFLECTOR MULTIBEAM ANTENNAS								
	APPLN. TYPE SMALL ENTITY		ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE		DATE DUE	
	nonprovisional	NO	\$1400		\$300	\$1700		11/01/2005	
	EXAMINER		ART UNIT		CLASS-SUBCLAS	S		ı	
· · ·	NGUYEN, HOANG V		28	2821 343-78					
1	Change of correspondence address or indication of "Fee Address" 1.363). Change of correspondence address (or Change of Correspondence form PTO/122) attached. "Fee Address" indication (or "Fee Address" Indicating form PTO/122) attached. Rev 03-02 or more recent) attached. Use of a Customer Number is required.			names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed 1 Kenyon & Kenyon 2 3					
	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when assignment has been previously submitted to the USTPO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. NAME OF ASSIGNEE (B)RESIDENCE: (CITY and STATE OR COUNTRY) Commonwealth Scientific and Industrial Research Organisation Please check the appropriate assignee category or categories (will not be printed on the patent); individual								
	Please check the appropriate assignee category or categories (will not be printed on the pa 4a. The following fee(s) are enclosed: 4b.				☐ individual ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	orporation of other pri	vate group en	my Bovernment	
	 ✓ Issue Fee ✓ Publication Fee ✓ Advance Order - # of Copies			☐ A Check. in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached ☐ The Director is hereby authorized by charge the required fee(s), or credit any government, to ☐ Deposit Account Number 11-0600 (enclose an extra copy of this form).					
	, ,	ge in Entity Status (from status indicated above) pplicant claims SMALL ENTITY status. See 37 CFR 1.27.							
	The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.								
Authorized Signature: Local Land Land Land Land Land Land Land Land									
								ng, preparing, and submitting the e this form and/or suggestions for nia 22313-1450. DO NOT SEND	

01 02 03